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CONFIRMATION NO. 6184

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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/421,640 10/25/2002  
and claims benefit of 60/431,626 12/05/2002  
and claims benefit of 60/431,627 12/05/2002  
and claims benefit of 60/431,906 12/09/2002  
and claims benefit of 60/431,861 12/09/2002  
and claims benefit of 60/443,618 01/29/2003  
and claims benefit of 60/459,061 03/28/2003  
and claims benefit of 60/458,994 03/28/2003  
and claims benefit of 60/458,995 03/28/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 01/26/2004

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 1	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

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## TITLE

Modified release compositions of milnacipran

FILING FEE RECEIVED 486	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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